

Unit on Ableism

Unit Outline

Session #

1. Introduction and photos

Students explore the concepts of “ability” and “disability,” and review stereotypes of “normal” and “abnormal” in classifying human appearance and behavior. Session closes with a structured discussion of photos depicting mistreatment of people with disabilities.

2. Disability

Beginning with a list of what counts as disability, students explore early experiences both of having a disability and of encountering someone with a visible disability. Session closes with reflection on how early experiences reflect their pictures of disability and people with disabilities.

3. Ableism

Students address ableism as an oppression, examining stereotypes, violence and institutionalized mistreatment people with disabilities experience, as well as the effects of these forms of oppression on them.

4. Fighting for Access

Students review concepts of resistance and develop a plan for improving access in the classroom for people with different types of disability.

5. Organizing/Action

Session 1. Introduction

Aims

- To introduce the unit on ableism
- To examine the concepts of ability and disability
- To identify and discuss two conflicts involving ableism

Skills

Students will:

- Identify some normal experiences of living with human limitations
- Identify stigmatization of some kinds of physical, mental and emotional limits as disabilities
- Identify target and nontarget group members in three conflicts involving ableism
- Suggest “resistance and alliance” responses to conflicts

Preparation

You will need photos for discussion and list of agreements from prior sessions. Use a marker board, butcher or easel paper for the “3 hearts” exercise, for use in later sessions.

Session Description

Students explore the concepts of “ability” and “disability,” and review stereotypes of “normal” and “abnormal” in classifying human appearance and behavior. Session closes with a structured discussion of photos depicting mistreatment of people with disabilities.

Session Outline

1. To Begin	5 minutes
2. Ability	15 minutes
3. Picturing Disability	15 minutes
4. Photos	15 minutes
5. Conclusion	5 minutes

Agenda

1. To Begin 5 minutes

Remind students of agreements. Explain that this unit addresses “ableism”: the discrimination against and mistreatment of people who live with disabilities.

2. Ability 15 minutes

Conduct the following visualization, having students sit comfortably in their chairs, close their eyes or look at the floor, and take a few moments in silence to notice their breathing. Give the following directions:

- a. Pick a favorite animal other than human beings—mammal, fish, bird, reptile, etc. Visualize it—make an image before your mind
- b. Visualize your animal as it lives in the world: how it lives, how it functions, how it moves through the world.

c. Now think of something that your animal does—an ability it has—that human beings, including you, don't have. (E.g., if you are picturing a bird that can fly, flying is one thing it does that you can't do without help. If you are picturing a fish with gills, it can live and breathe under water, whereas you would need assistance.) Make a clear picture for yourself of this ability that you lack. Now think of the following questions silently:

- Would you have noticed, without this visualization, that you “lacked” an ability?
- How is your life impacted by being without this ability?
- How do you get along without this ability?
- How do you compensate for lacking this ability? E.g. if the ability is flying, what do you do to be able to fly?
- Do you feel that you are “less than” a regular organism because you “lack” this ability?

Close the visualization. Have students break into dyads to take turns following the instruction:

- Tell your partner the “ability” you don't have; then identify what abilities you have that enable you to get along without this particular ability; e.g., if the ability you don't have is the ability to fly, you get along without it by all the other forms of movement and transportation you have.

Close the dyad by having a few students report how it felt to do the visualization, and/or what they came up with in the dyad.

Summarize by pointing out that:

- As human beings, it is normal for us to be able to do some kinds of things and not do others.
- Mostly, we do not experience the things we can't do as a lack or something that diminishes us. In fact, we may not even notice these “limits.”
- For all kinds of these limits, we figure out, living normal lives, how to get around them, how to compensate.

3. Picturing Disability

15 minutes

Write the word “disability” on the board. Ask students, for a few moments, to throw out words or phrases they attach to the word “disability.”

Explain that students have been talking about our “abilities,” the ways we function in the world. It is part of every human life to have some abilities—be able to do some things—and not do others. And our “abilities” are always changing as we grow and grow older.

Explain that you are now turning to look at a different picture of ability: how society pictures “normal” and “abnormal” in physical, emotional and mental human capacity and behavior—how it pictures *disability*.

Remind students of heart exercise—we are all “hearts.” At different times in a heart's life, sometimes throughout her/his life, they may experience limits in physical, mental, or emotional capacity to do something.

- What does a heart do when it experiences a limit? (Ans: *it changes, figures out a way to adapt, &c.*)
- Is a heart that experiences any of these limits “less than” a heart?

Explain that “ableism”—the mistreatment of people identified as having particular kinds of “limits”—begins to happen when we use stereotypes of what is supposed to be “normal” for human beings and what is “abnormal.”

Draw three hearts on marker-board or butcher paper you can use later, labeled “mental,” “emotional,” and “physical.”

mental



emotional

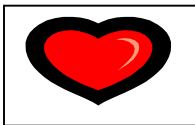


physical



Explain that each of these is a picture of part of what it means to be human: what it’s like for a human to think; to have emotions; and to be a body.

Draw boxes that enclose each of the hearts. Explain that each box stands for the “shaping” that happens to hearts—the way social institutions train all of us in what is “normal” and what isn’t normal. (If you have done the unit on sexism, you may refer to the act like a man/act like a lady boxes as expectations placed upon young people about how young men and women are each supposed to act.)



For the following, ask the question and write student responses for each of the boxed hearts.

Ask:

- What are words we use to describe a person with a “normal” mind or mental state?
What are words we use to describe a person with “normal” feelings?
What are words we use to describe a person with a “normal” physical body?

Write these words into the appropriate box/heart.

- b) What are words we use to describe an “abnormal” mind or mental state?
 What are words we use to describe “abnormal” feelings of a person?
 What are words we use to describe “abnormal” features of a body?

Write these words around the exterior of the appropriate box/heart. Draw a circle around the whole.

- c) What are the names we sometimes call/stereotypes we use for people identified as having “abnormal” minds?
 People identified as having “abnormal feelings”?
 People identified as having “abnormal” bodies?

Write these words around the exterior of the appropriate circle.

Close the exercise by having students reflect on the words on the board. Ask them, recognizing the stereotypes on the board, to define or give examples for what “ableism” is—discrimination against people with identified disabilities.

4. Photos

15 minutes

Distribute the photographs in turn, conducting the following discussion:

Incident #32 “Get Out of My Way” (Female in motorized wheelchair in aisle in supermarket; women behind her trying to get her food cart past)
 (uncaptioned)

- What’s happening in this scene?
- What do you think the standing woman is saying to herself?

(with captions)

- What’s happening in this scene?
- What is the standing woman thinking?
- Based upon our previous discussion, what stereotypes might she have in her mind about the woman in the chair?
- What might happen next—what might the standing woman do?
- How might her actions affect the woman in the chair?
- Who is being inconvenienced in this scene? (Ans.: *both women*)
- Who is responsible for the seated woman’s inconvenience?
- When you look at the way the supermarket is built, its aisle length, products’ display, etc., whom is the market set up for—who is its ideal customer? Who is it not set up for? How can you tell?
- If you were a best friend of the woman in the chair, what would you do in this scene?

Incident #33. “Go Out With Me?” (Young man on crutches asking young woman for date)
 (uncaptioned)

- What’s happening in this scene?

- Describe the expressions on the faces of the student on the left and the three observing students in the background. What do they suggest about what is happening?

(with captions)

- What's happening in this scene?
- How does the young woman seem to feel about being asked out by the young man, based on the expression on her face?
- How do the spectators seem to feel about what's happening?
- How is the young woman likely to reply to the young man?
- If she turns him down, what might be the real reasons she does so, whether she discloses them or not?
- Do these reasons have to do with the young man as a person, or with his disability?
- When the young woman and the spectators look at the young man, what do they see: the person, or his disability?
- Is someone being targeted in this scene? If so, who? What mistreatment is happening?
- If the young man is turned down, how might he react in a way that would be sexist (mistreating women)?
- How could he handle being turned down without being sexist?
- How could he resist mistreatment?
- If the young woman or the spectators were acting as allies to the young man, what might each of them do?
- If the young woman wanted to be an ally to the young man, but also didn't want to go out with him (e.g., she wants to be friends, but isn't romantically interested in him), how could she handle the scene?

[photo on mental health oppression not done yet]

5. Conclusion

5 minutes

Ask students to volunteer reflections—what they noticed, thought about or learned in this session.

Session 2 Disability

Aims

- To explore early, negative experiences of having disabilities
- To explore early experiences of encountering someone with a visible disability, including messages about who disabled people are

Skills

Students will:

- Define physical, emotional and/or physical states identified as disabilities
- Understand the distinction between having a limitation and social stigmatization of disability
- Identify early experiences of limitation and stigmatization
- Identify messages they received from early experiences of witnessing others' disabilities

Preparation

Post the “3 hearts” exercise from the last session. You will a marker board or butcher paper to create the word map of “disability” to be able to refer to it in the next session.

Session Description

Beginning with a list of what counts as disability, students explore early experiences both of having a disability and of encountering someone with a visible disability. Session closes with reflection on how early experiences reflect their pictures of disability and people with disabilities.

Session Outline

1. To Begin	5 minutes
2. What is disability?	10 minutes
3. Early experiences	30 minutes
4. Conclusion	10 minutes

Agenda

1. To Begin 5 minutes

Review last session. Explain that today the class will look at disability itself—the different things that count as “disabilities” in our society, as well as early experiences students may have of being disabled and of witnessing other people with disabilities.

2. What is disability? 10 minutes

Write the word “disability” on marker-board or butcher paper. Referring to the three “hearts” from the last session—physical, emotional, and mental—ask students to construct a word map of the kinds of physical, mental and emotional states or conditions that count as “disabilities.” Invite them to think as widely as they can of anything that counts as the experience of a limit in “normal” human functioning.

As a special instruction, have them make the list as much as possible *without using stereotypical words or medical terms*, in order to keep the terms or phrases as close as possible to how those of us with identified disabilities might use terms ourselves. (Sometimes, of course, there will be no

other terms to use: "blind," "dyslexia," and "paraplegic" are medical terms in common usage.) Make the following distinctions, to ensure the terms include:

- Physical, mental and emotional disabilities
- Short-term or temporary and long-term conditions
- Disabilities related to illness or injury and those not related to illness or injury
- Visible and invisible, "hidden" disabilities
- Learning disabilities
- Less involved ("milder"), such as allergies, skin conditions, and so forth, and more involved ("more severe"), such as mobility impairment, blindness, deafness and so forth
- Conditions that may seem to be voluntarily contracted by people, like addictions such as alcoholism

At the close of the exercise, invite students to look over the list. Have them silently identify disabilities, listed or not, that they may have experienced, and/or that family members or friends have experienced. Ask:

- Why is it important to try to describe disabilities without using stereotypical words or medical terms? (*Ans: sometimes stereotypes or medical terms devalue or put down what they name; some medical terms are developed by physicians for their own use, not by disabled people themselves; medical terms may not be familiar to disable people, or adequately name their own experience of their disability, &c.*)

3. Early experiences

30 minutes

Explain that the class will now be looking at two kinds of early experiences young people may have: of having identified disabilities and of witnessing other people with identified disabilities. Have students form dyads with others they may not know so well; then have dyads join into 4-member groups.

a. Being disabled

Using the list on the board, have students identify silently an early experience they have personally had of having a disability—an injury, illness, or more long-term condition, with little involvement or a lot of involvement. It will likely be a disability identified by others, e.g. diagnosed by a doctor, but it doesn't have to be. It could be as little involved as having a broken leg, or being identified as needing glasses or "corrective" lens, or getting sick.

Have students take turns in their group, 2-3 minutes each, talking about what they can remember about being disabled in this way. They do not have to identify the disability, but can simply talk about their experience. Remind students of the right to pass, and remind them of the confidentiality agreement, to keep what other students in their group say confidential, and not to comment on what others say when it is their own turn to speak. Post the following questions for students to speak to if they wish:

- What was it like to have this condition?
- What "limits" did I experience with this condition?
- How did I find out that I had this condition?
- If it was "diagnosed" by a doctor or clinician or other professional adult, how did it feel to be "diagnosed"?
- How did I feel about having this condition?

- How did other people act around me when/if they knew about the condition?
- How did their actions, if any, make me feel about myself?
- How does it feel to talk about this with other students?

At the close of the discussion, reconvene class for a moment to ask for a show of hands: how many students experienced some discomfort in talking about their experiences. Ask a few to volunteer thoughts on why they might be feeling discomfort: what is it about being identified as having a disability that may makes someone uncomfortable? Have students write for 2-3 minutes about any feelings they had during this activity.

b. Witnessing disability

Reconvene groups for the next round, following the same format and instructions, to address the following question. Have students identify silently an early experience of witnessing or being shown someone with a visible disability. Invite them to think of the earliest experience, or the one that comes immediately to mind. Then have them take turns as before, using the following posted questions if they wish:

- Briefly describe the experience of witnessing, or having someone else show them, a person with a disability.
- How did it feel, witnessing this person?
- How did other people act around this person?
- Think of any ways the person with a disability was treated as “different,” and how that made you feel.
- If another person was with you, how did this person react? How might they have told you to act?
- If you were told to act in a certain way, how did that make you feel? How might it have made you feel about having a disability?
- When you think about it now, what information about that person or their experience would you have liked to have had? If no one gave you information then, why do you think that was?
- If you had been able to ask any question you wanted to of the person with a disability, what would you have wanted to ask?
- Finally, describe any way that you can think of that this experience might have gotten in your way of having a normal human relationship with the person with a disability.

4. Conclusion

10 minutes

Reconvene class for closing reflection, addressing the question:

- What do my early experiences show about how I was to picture disability and people with disabilities?

After a few responses, have students report, without discussing what other students in their groups said, what insights they may have from their small-group discussions. If time remains (or for homework), have students write for several minutes about this session.

Session 3 Ableism

Aims

- To define ableism
- To examine three aspects of the oppression of ableism

Skills

Students will:

- Identify target and nontarget groups of mental, physical and emotional ableism
- Produce examples of stereotypes, violence, and institutional mistreatment that different groups of people with disabilities experience.

Preparation

You will need a copy of the power chart from the foundation sessions for reference, as well as the 3-hearts exercise from session 1 and the disability word map from session 2.

Session Description

Students address ableism as an oppression, examining stereotypes, violence and institutionalized mistreatment people with disabilities experience, as well as the effects of these forms of oppression on them.

Session Outline

1. To Begin	10 minutes
2. Ableism	15 minutes
3. 3 faces of ableism	20 minutes
4. Closure	10 minutes

Agenda

1. To Begin

10 minutes

Write the phrases “physically different,” “mentally different,” and “emotionally different” on the board. For each phrase, ask students to call out words used to describe the kinds of physical/emotional/mental differences—differences in body size and shape, mental intelligence, emotional intelligence, sense-perceptions, speech, behavior and so forth—that people can have. Reminding students of the 3-heart-box exercise from session 1, encourage students to avoid stereotypical names, using neutral words as much as possible—words that don’t reflect negative judgments or putdowns about the difference in question.

Write the word “disabled” on the board. Ask students what happens to our image of “differences” when particular differences are renamed “disabilities.”

Ask what is implied when someone is described as *dis*-abled. Ask students for words that have been used in our society to mean “disabled,” and write these on the board. Be sure to include “handicapped” and “impaired.” What message is implied in these terms?

Finally, write the phrases “disabled people” and “people with disabilities” on the board. Ask students to notice any differences in emphasis in these two phrases. Close by explaining that

from now on you will be encouraging them to use the latter phrase, to prioritize the person rather than the disability.

2. Ableism

15 minutes

Invite students, following the “try it on” agreement, to consider the following definition. Explain the term “ableism,” using the formula developed from the foundation sessions on the board:

$$\textit{prejudice} + \textit{power/power-over} = \textit{ism}$$

“Ableism” means the discrimination against or mistreatment of people identified or labeled as living with mental, emotional or physical differences, and the elevation of “normally”-abled people into positions of power and privilege over people with these differences.

The target group includes people with visible physical differences—using assistance with mobility, hearing, sight, speech, and so forth; people with mental differences, in speech, type of intelligence, behavior, and so forth; and people whose differences are hidden—people who can hide or mask physical or mental differences.

Target	nontarget
People living with disabilities	Physically/emotionally/ mentally-abled people

Have students review their work in the last two sessions. On one hand, they discussed:

- what it means to “lack” an ability and learn how to compensate for it (session 1)
- what are counted as “differences” in humans’ physical, mental or emotional make-up when these are described simply as differences (this session).

On the other hand, they looked at:

- the photographs of people with disabilities being stereotyped or mistreated
- the 3-hearts, normal/abnormal exercise, about how some differences are characterized as “abnormal,” with stereotypes and putdowns attached (session 1)
- early, sometimes negative experiences of having disabilities and learning about other people with disabilities (session 2)

Ask students, based upon this work, to say in their own words what “ableism” could mean.

Make the following additional points, writing boldface phrases on the board:

- **Anyone can be a target:** unlike some of the other “isms,” anyone can be a target of this ism, and will be at some time in her/his life. Anyone can have or contract a visible or hidden disability, illness or injury, and anyone’s “normality” can be called into question.
- **Being seen as disabled:** virtually all people with visible disabilities have undergone the experience of being stared at, perceived and treated as different or “abnormal,” or identified simply by the disability they have (e.g.: a “cripple”; “AIDS” victim; “a blind person,” &c.).

- **Disability and illness:** ability and disability are not the same as health and illness: people living with physical or mental differences can at any time be ill or well—what distinguishes their experiences are socially-defined categories of “normal” and “abnormal.”
- **Ableism and other isms:** ableism has sometimes been used historically to justify other isms. For example, women have been labeled as “too emotional,” “irrational,” or “hysterical,” while various groups of people of color have been labeled as less intelligent, even “primitive” or “savage,” particularly when they were resisting mistreatment. The labels imply that these groups are “less-than” men or white people because they possess these (abnormal) features.

Sometimes target groups, doing their best to resist, have responded to this mistreatment not by challenging the ableism in these labels, but by proving that the labels don’t fit them, thereby leaving the labels in place—e.g., women rightly fought to prove that women are not “irrational” or “hysterical”; people of color have rightly fought against be labeled as mentally deficient. But this can inadvertently leave uncontested the assumption that anyone so labeled deserves to be treated as “less-than.”

- **Real disability:** what we call disabilities are often, of course, genuine limits on “normal” human functioning. A person with such a disability may (or may not) need assistance: a person with paraplegia may need a wheelchair; a person with a learning disability may need a particularized program of teaching. What’s different about ableism is the stigma that attaches to disability, which can often mean that exactly the assistance a human being needs may be denied to her/him through lack of resources or lack of social awareness.
- **Medicalization:** finally, most identified “disabilities” have, only in the last century, come to be defined by developing medical institutions *as* “disabilities” to be “treated.” People identified with disabilities have become “cases” or “patients,” dependent upon medical institutions not only for care but even for the very concepts of disability or illness they “have.” Medicalization has meant prolonged and improved lives for many people; but it has also brought about segregation, lack of understandable information, dependence, medical experimentation, wrongful diagnosis and treatment, and premature death of people with disabilities.

3. 3 faces of ableism

20 minutes

Post the disability “word map” from the last session for reference in the following small-group work, having students review the distinctions:

- Physical, mental and emotional disabilities
- Short-term or temporary and long-term conditions
- Disabilities related to illness or injury and those not related to illness or injury
- Visible and invisible, “hidden” disabilities
- Learning disabilities

- Less involved (“milder”), such as allergies, skin conditions, and so forth, and more involved (“more severe”), such as mobility impairment, blindness, deafness and so forth.
- Conditions that may seem to be voluntarily contracted by people, like addictions such as alcoholism

Divide students into three work groups for the following exercise.

Each group will address one of the three faces, recording their best thinking of the ways people living with disabilities are mistreated, keeping in mind as much as possible all of the different conditions of disability touched on in the map.

Once groups are set up with materials, provide appropriate handouts and particular instructions to each group.

a. group 1 – stereotypes

Explain that the class has already begun to list stereotypes in the “3-hearts” exercise from session 1. The purpose of this group is to look at some of the stereotypical disabled “characters” from history and popular culture, and the message conveyed about them. Review the stereotype handout with the group. Have them think of and write up as many answers as they can on butcher paper.

b. group 2 – violence

Invite students to think about how people with the different kinds of disabilities listed in the word map might experience violence—restraints on movement; medication against their will; involuntary incarceration or segregation; physical, emotional or sexual violence; neglect; and other forms. Have them think of and write up as many answers as they can on butcher paper.

c. group 3 – institutionalized mistreatment

Have students examine the institutions listed in the left-hand column of the handout. Their task will be to fill in the columns on butcher paper: how people with different kinds of disabilities may be discriminated against, made invisible by, limited, or mistreated in the various institutions on the list. Have them think of and write up as many answers as they can on butcher paper.

3. Conclusion

10 minutes

Reconvene groups for closing: ask groups to post their papers together, with a spokesperson from each group briefly describing the group’s work. Finally, ask students to volunteer how it felt to complete their exercise, and/or one new thing they learned in this session.

Handout 1: STEREOTYPES of people with disabilities

For the stereotypical figures of people with disabilities listed below, fill in the chart answering each question with as many answers as you can. Complete as many “figures” as time allows.

<i>Stereotypical figure</i>	<i>Other names or putdowns applied to this figure</i>	<i>Examples from popular culture, history, movies, TV, books, comics, videogames, and so forth</i>	<i>Message about who this person is/feeling that you’re supposed to have when you see this figure</i>	<i>How this affects actual people with disabilities</i>
“Freak”				
“Monster”				
Poster child				
Helpless victim				
Heroic overcomer of their disability				
“Little person”				
“Giant”				
“Obese”				
“Anorexic”				
Mental patient				
“Humpbacked”				
“Leper”				
“Lame”				
“Idiot”/ “moron”				
“Retard”				
Person with AIDS				
“Druggie”				
Other...				

Handout 2: VIOLENCE against people with disabilities

Using the chart below, make a chart on butcher paper of how people with the different kinds of disabilities listed in the word map might experience violence—restraints on movement; medication against their will; involuntary incarceration or segregation; physical emotional or sexual violence; neglect; “pulling the plug” and other forms. Think of and write up as many answers as you can in the time allowed.

<i>Disability</i>	<i>Violence</i>	<i>How this affects people with disabilities</i>
People with physical disabilities, e.g. Blind Deaf Wheel chaired Birth defects and others		
People identified with mental/emotional disabilities, e.g. Learning disabled “Special ed” “Mental problems” and others		

Handout 3: INSTITUTIONALIZED MISTREATMENT of people with disabilities

Examine the institutions listed in the left-hand column. Write up chart on butcher paper, and fill in the columns: how people with different kinds of disabilities may be discriminated against, made invisible by, limited, or mistreated in the various institutions on the list. Think of and write up as many answers as you can in the time allowed.

<i>Type of institution</i>	<i>Examples of discrimination or mistreatment</i>	<i>How this affects people with disabilities</i>
Housing		
Public businesses/stores		
Public Transportation		
Public buildings		
Medical/healthcare system		
Workplace hiring		
Workplace set-up		
Movie theaters		
Amusement parks		
Public recreation areas – parks and pools		
School building		
Education		

Session 4. Fighting for Access

Aims

- To understand how people with disabilities have resisted ableism
- To understand the concepts of barriers and access for people with different types of disabilities
- To explore what allies for people with disabilities should, and should not, do as allies
- To develop plans for improving access in the classroom

Skills

Students will:

- Identify resistance strategies for people with disabilities
- Learn the concept of access for people with disabilities
- Determine barriers in the school to complete access in the school for people with disabilities
- List actions allies can take that are useful, and actions that are not useful, in support of people with disabilities
- Devise changes in the classroom set up and teaching process to improve access for people with disabilities

Preparation

You will need butcher paper and markers for small groups for the “barriers” part of the access exercise. For the opening roleplay, decide on and prepare potential role-players in advance. If there are wheel-chaired students in your class, give them an option of acting in the roleplay, in the role(s) they wish to.

Session Description

Students review concept of resistance, and develop a plan for improving access in the classroom for people with different types of disability.

Session Outline

1. To Begin	5 minutes
2. Resistance	10 minutes
3. “You Poor Thing”	10 minutes
4. Access	25 minutes
5. Closing: Access for all	5 minutes

Agenda

1. To Begin 5 minutes

Have students summarize the last session, including the findings of the small-group work. Explain that in this session students will begin to think how to interrupt ableism.

2. Resistance 10 minutes

Review the concept of “resistance” from the foundation sessions: “the ways people have used to resist or fight back against oppression and against being conditioned to see others or themselves as less.”

Ask students, in the following, to apply the concept of resistance to ableism: how have people living with disabilities resisted ableism?

a. Personal resistance dyad

Form dyads. Have students take turns recalling the personal experience of having a disability or witnessing someone who was disabled that they came up with in session 2. In the dyad (one minute each way), have each student brainstorm as many ways as she/he can remember that the person with the disability (whether her/himself or someone she/he witnessed) resisted being stereotyped or stigmatized as disabled. Remind them that this is not about resisting being disabled, or coping with it “heroically,” but rather resisting the oppression of ableism—the stigma that might attach to having a disability.

Finish the dyad, and have students call out as many forms of resistance as they can.

b. The movements

Explain that beyond personal resistance, there has been longstanding organizing by disabled activists against ableism, the latest within the last 20 years. Have students volunteer any information or knowledge they have about these movements, and add in the following:

Disability Resistance Movements
<ul style="list-style-type: none">• Patients’ rights: organizing among disabled recipients of medical care for informed consent for medical treatment, against forced incarceration or medication for people with mental disabilities, &c.• Organized communities: advocacy groups organized by and on behalf of particular constituencies: the Blind community, the Deaf community and others.• Independent living movement: organizing to enable disabled adults live independently of institutions, establishing and maintaining households and employment• Disability rights movement: activists organized to change existing laws and create new legislation ensuring public access and accommodations for all disabled people, and schools and workplaces that integrate abled and disabled people (“mainstreaming” people with disabilities)• Cultural access: people with disabilities organizing their participation in sports (special Olympics), arts (Access Theater for actors with and without wheelchairs, National Theater for the Deaf, &c) and other arenas

Explain that students are about to do a roleplay confronting ableism. Point out that it will be particularly important, whether in the roleplay or in further activities, to keep in mind how people with disabilities resist, because:

- disabled resistance is often “invisiblized” (because disabled people themselves are largely kept invisible in mainstream culture), and
- ableism works by assuming that disabled people are helpless and need to be “helped”—whether they ask for help or not; so well-intentioned allies may take over, once again taking power away from the targeted group.

3. “You Poor Thing”

10 minutes

Have three students who have previously volunteered and been prepared for this roleplay take their places in front of the class. Bring one chair to the front of the room. One student sits in the chair, while the others face her/him. All three are same-age students. The chair is a wheelchair; the person in the chair—the first patron—is paraplegic, and the scene is in the first-floor lobby of a movie theater. One of the other students plays a second patron who is not paraplegic; one plays the (student-age) assistant theater manager. (Remember that if real-life wheel-chaired students volunteer to participate, they have the option of playing any of the three roles.)

Scenario

In the following scene, the second patron plays the part of someone who wants to help, but her/his chief feeling about the chaired person is *pity*: “it’s so sad that you have this handicap.” The chaired patron has bought a ticket to see a film on the second floor, but the only access is by stairs (the elevator is broken, as it often is at this theater). This has happened before, and this time she/he refuses to leave until something is done about the elevator. The manager plays an overworked, embarrassed employee who is trying to talk the chaired person into leaving. She/he might offer to have the chaired person taken out of her/his chair and carried up to the theater by other employees (the other patron might offer to help do this); she/he might argue that it costs too much to fix the elevator; or might end up angry at the chaired person for complaining too much, making things too inconvenient. The chaired person refuses to be lifted out of her/his chair, and holds to the principle that the theater is responsible for making movies “accessible” to everyone.

Invite students to play out the roleplay with the above directions for 2-3 minutes. Encourage the students enacting the second patron and the theater manager play their character parts fully, saying all the “wrong” things.

Freeze the roleplay. Have the actors take turns talking about how it felt to be in their roles, beginning with the chaired person. Then have other students report what they observed. Ask the following, based on this roleplay:

- How was the chaired person mistreated?
- How did the chaired person resist mistreatment?
- Does the person in the chair need assistance in this situation?
- What kinds of assistance were not helpful? Why?
- What could a chaired person do to change this situation? What could an ally do?

Finish by having students applaud the actors.

4. Access

25 minutes

Explain that, like anti-sexism, anti-racism and anti-heterosexism movements, a powerful *resistance* movement for *disability rights*, led by people with disabilities, has happened in the last two-three decades in the United States. One of the most important things disability activists have fought for is **access**, the right for people with disabilities to be enabled to participate in all areas of civic life that abled people do. Activists have continually shown that “pity,” denial and minimization of the problem, or complaints that changes “cost too much,” are themselves part of the oppression of ableism.

Explain that students will now turn to a group project on making a place—the room in which the class is taking place—accessible not only to abled people but to people with different disabilities— “no one left out, no one left behind.”

Break students into small 4-member workgroups. Each group will be assigned accessibility planning for one of the following groups of people with disabilities (if you have more than 24 students, you may make 6-member groups; if fewer, you may use fewer categories).

- a) blind
- b) deaf
- c) in a wheelchair
- d) learning disabled
- e) special ed
- f) breathing allergies/asthmatic

When groups are assembled with assigned category, put them through the following process:

a. My Day So Far¹

Have students form dyads within their groups. Each student will have 2 minutes to talk in his or her dyad. The topic is going through “my day so far” as someone with this particular disability:

- what happens when I wake up
- what happens with breakfast and getting ready for school
- how I get to school
- how I enter school and go to class

as the person I am, with this disability.

If the student has the disability in question, s/he will speak about their own experience; if not, s/he is to imagine what happens. Explain that when students don’t have enough information about the disability in question, they should just do their best to think about what it would be like, without using stereotypes—and notice how it feels not to have the information.

Time the dyads, telling students when to switch. Complete the dyads, and have students, while still in their groups, to process for a few moments what it was like to talk about the topic, including any difficulty or discomfort.

b. Access brainstorm

Now the task of each group will be a brainstorm exercise about a day at school for students who have the disability assigned to the group, in the following steps:

1. barriers: brainstorm all of the barriers a student with this disability will face, in the school building architecture, environment, room set-up, teaching process and classroom procedure, school “tracking” of students into segregated groups, and/or attitudes from other students or teachers. Write as many barriers as they can think of on butcher paper (5 minutes).

¹ Adapted from an exercise by Marsha Saxton

2. changes: brainstorm what should be different in room set-up and space, class presentation, teaching process and the rest (5 minutes), to enable the student with this disability to participate fully, as an equal and as a “heart,” with everyone else. A central part of the task will be to incorporate the standpoint of people with the disability: how would a person with this disability design the room to be accessible? Be as specific as possible. Someone in each group should take notes of changes, for ready reference.
3. allies: brainstorm how able-bodied can help, and how NOT help, students with this disability in having the room become fully accessible (5 minutes).

c. The accessible classroom

Using their notes about changes, have groups take 5 minutes, all at the same time, to make any changes in the room setup they have devised.

d. Group reports

If there is remaining time, have each group take turns reporting on their lists of changes, both the rearrangements they were able to do and what else they would recommend.

5. Closing: Access for all

5 minutes

Close by having students take a few moments to look around the (rearranged) room silently, and think about both the changes that were made and others that were proposed. Then have a few respond to a final question:

- How would improved access which benefits students with disabilities **also** benefit able-bodied students?

SESSION 5.

Aims

Skills

Preparation

Session Description

1. To Begin

2. Main Activity

3. Closure/Conclusion

4. Follow up Sessions/Activities

Assessment/Evaluation